

Phase 1: Refine Key Outcomes & Research Questions

Desired Outcomes

1. Reduce HIV infections
2. Reduce genital herpes infections (HSV-2) and sexual risk behaviors (specific behaviors not identified)
3. Decrease male violence
4. Increase knowledge on sexual health
5. Increase communication and agency

Research Questions

1. Does using role-playing and drama to build sexual and reproductive health among young people lead to a reduction in HIV and other outcomes?
2. Does the combination of 13 core education sessions, three peer group sessions, and one final community meeting lead to a reduction in HIV and other outcomes?

Phase 2: Determine PYD Features & Beneficiaries

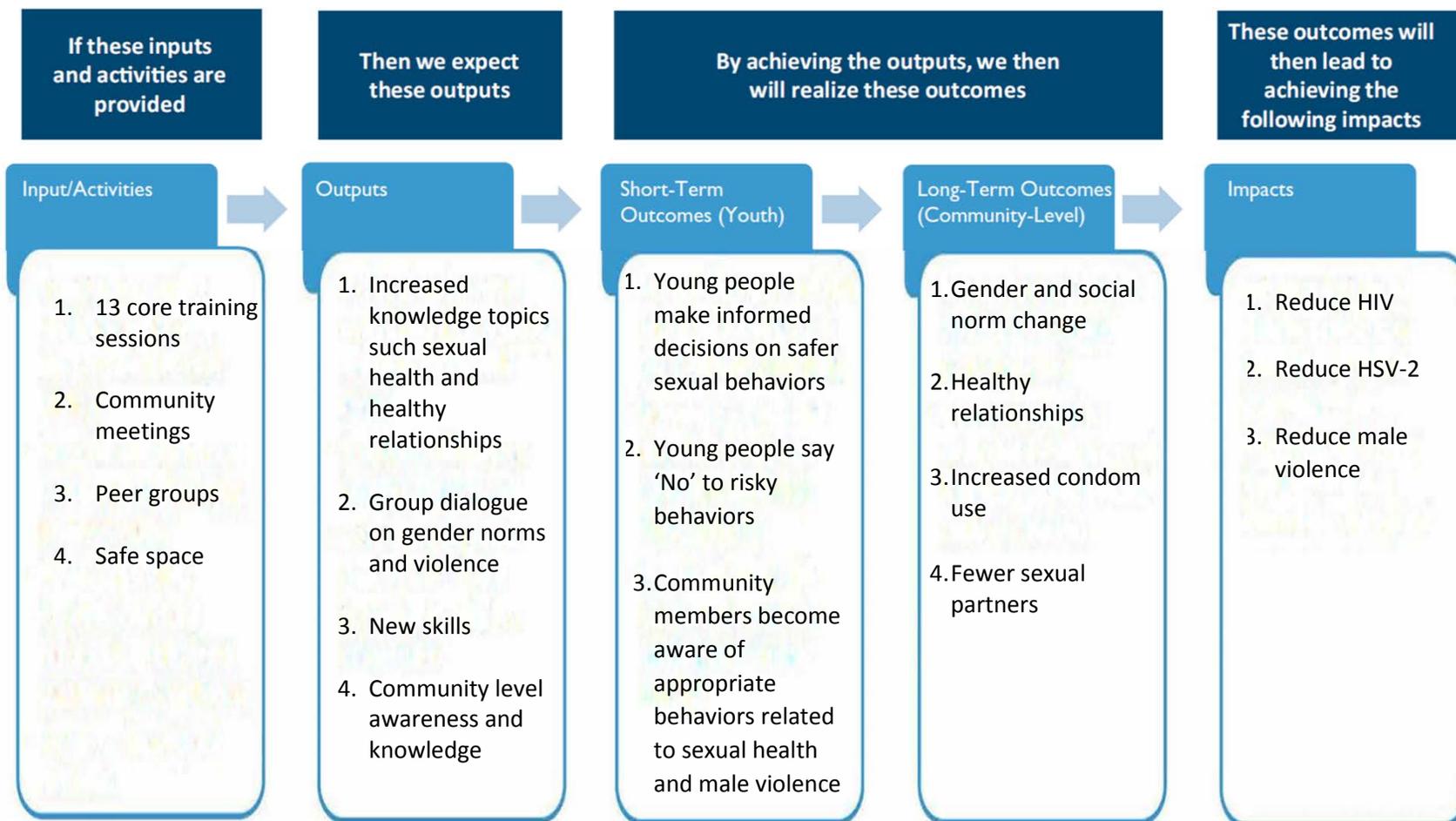
Features

1. Skill building (e.g. interpersonal skills, assertive communication)
2. Youth engagement and contribution (e.g. dialogue between peer groups and with community)
3. Safe space: depending on how the school space is set up, could be a safe space for program participants and other young people in the community.
4. Enabling environment: Positive norms

Beneficiaries

1. Primary: Members of the peer groups (youth 15 to 26)
2. Secondary: Community members, other young people at risk of HIV/other negative outcomes

Phase 3: Finalize the Logic Model



Phase 4: Decide What to Measure and How

	Indicator	Type of Indicator
1.	Domain: Assets, Construct: interpersonal skills: Increased interpersonal skills at the conclusion of training/programming (specifically assertiveness)	<input type="checkbox"/> Output <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
2.	Domain: Enabling environment Construct: Prosocial norms: Increased prosocial norms at the conclusion of training/programming	<input type="checkbox"/> Output <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
3.	Domain: Agency, Construct: Self-efficacy: Increased self-efficacy at the conclusion of training/programming (could be specific skill like talking to a partner about using protection)	<input type="checkbox"/> Output <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
4.	Number of community meetings	<input type="checkbox"/> Output <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
5.	Domain: Agency, Construct: Self-control: Increased self-control at the conclusion of training/programming	<input type="checkbox"/> Output <input type="checkbox"/> Outcome <input type="checkbox"/> Impact

Study Design

- Quantitative pre/post tests with young people in the community on knowledge, attitudes, beliefs, norms, practices in sexual and reproductive health (assuming the intervention diffuses into the community sufficiently)
- Qualitative: In-depth interviews with young program participants; community members
- Key informant interview with staff at various sexual and reproductive health services who work with young people
- If possible, train young researchers (not those in program) to collect data

Phase 5: Analyze Data, Disseminate Findings, Adapt Program

Data Analysis Approaches (Qualitative & Quantitative)

1. Beyond traditional analyses that would correspond with the above data collection plan, a PYD approach to an analysis would focus on how certain assets change over time. Team could use a case study approach to focus on how a few participants developed assertiveness or interpersonal skills as a result of their experience, and how that impacted choices they made.
2. Qualitative analysis could use codes specific to PYD, such as positive sense of self, positive beliefs in the future, elements of a support environment for young people in the community (e.g. a key informant who says that she values what young people have to offer), etc.

Dissemination Methods

1. Young people from the program take results of study back to the community groups and share, have open dialogue about what the results mean and brainstorm collectively the next steps
2. Colorful, easy-to-read briefs with infographics to share with other young people with information related to the results

Adaptations

1. Ensure that the tools used to measure aspects like assertiveness and interpersonal skills are relevant to the specific ethnic/religious groups targeted in this South African population. If not yet validated in this context, must pre-test and validate the tools to ensure they are valid and reliable for this population.
2. Make sure to disaggregate results by age and sex: already have done this within the program so should be easy to do this in the analysis, especially for the PYD tools.
3. Assess: are there other youth to try and understand: LGBTI, youth with disability, youth with low resources, etc? How might their answers to some of the tools and within the interviews be different than other youth?